American Fork Police Department

75 East 80 North American Fork, Utah 84003

Voluntary Statement

OFFICE USE ONLY				
Case Number:				

Name: _			Birth Date:	/ / Today'	s Date://	
Street Ad	dress:	Email:				
City: Sta Home Phone: Work I		e:				
		Work Phone:				
SSN:		Hair Color:	Eye Color:	Height:	Weight:	
	Circle One:	Complainant	Witness	Suspect	Victim	
you are about t that you do not	o make may be presented t believe to be true may sub	section (1) is sufficient if it is ve o a magistrate or a judge in lieu ject you to criminal punishment	of your sworn testimony at a as a class A misdemeanor.	preliminary examination 1	cer) "You are notified that statements Any false statement you make and ************************************	
Step 2:	Statement Nar	rative (Please write	what occurred. What occurred	ho, What, Where, V	Vhen, How, etc.)	